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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 10 APR 22 AM 11: 13

NAME OF USE FEC MAIL COMMITTEE (in full) OR TYPE OR		typing, type	Office dise Only
Dan Coats for Indiana ADDRESS (number and street) Check if different than previously reported. (ACC) Indianapoli C00476374	01141	STATE A	ZIP CODE A STATE V DISTRICT
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)	Conv Election on 0 (c) 30-Day POST-Elect	on Report for the:	eral (12G) Runoff (12R) cial (12S) in the State of off (30R) Special (30S) in the State of
5. Covering Period 0 4 0 1 I certify that I have examined this Report and to t Type or Print Name of Treasurer Dougl Signature of Treasurer NOTE: Submission of false, erroneous, or incom-	he best of my knowledge and as Long Alex P. Long Tz Douglas Long	Date 0	omplete.
Office Use			FEC FORM 3 (Revised 02/2003)